

POWER OF ATTORNEY BY INVENTOR

Assistant Commissioner for Patents
Washington, D. C. 20231

Sir:

As the named inventor in the application for United States Letters patent entitled MAGNETIC STRIPE AUTHENTICATION AND VERIFICATION SYSTEM which application papers were filed June 3, 1999, I hereby appoint: Byard G. Nilsson, Reg. No. 17,350; Harold E. Wurst, Reg. No. 22,183; Robert A. Green, Reg. No. 28,301; Stephen D. Burbach, Reg. No. 40,285; John Wurst, Reg. No. 40,283; Ross Snyder, Reg. No. 37,730; Ivan Posey, Reg. No. 43,865; Derrick Reed, Reg. No. 40,138; Gordon D. Coplein, Reg. No. 19,165; William F. Dudine, Jr., Reg. No. 20,569; Michael J. Sweedler, Reg. No. 19,937; S. Peter Ludwig, Reg. No. 25,351; Paul Fields, Reg. No. 20,298; Joseph B. Lerch, Reg. No. 26,936; Melvin C. Garner, Reg. No. 26,272; Ethan Horwitz, Reg. No. 27,646; Beverly B. Goodwin, Reg. No. 28,417; Adda C. Gogoris, Reg. No. 29,714; Martin E. Goldstein, Reg. No. 20,869; Bert J. Lewen, Reg. No. 19,407; Henry Sternberg, Reg. No. 22,408; Peter C. Schechter, Reg. No. 31,662; Robert Schaffer, Reg. No. 31,194; David R. Francescani, Reg. No. 25,159; Robert C. Sullivan, Jr., Reg. No. 30,499; Ira J. Levy, Reg. No. 33,587; and Joseph R. Robinson, Reg. No. 33,448, all members of the bar of one or more states, all of the law firm of Darby & Darby, P.C., 707 Wilshire Blvd., 32nd Floor, Los Angeles, California 90017 and 805 Third Avenue, New York, New York 10022, as my attorneys and agents to prosecute this application and transact all business in the United States Patent and Trademark Office in connection therewith.

Please send all correspondence to:

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Date: May 25, 1999

By: Robert S. Deland
Robert S. Deland
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Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (12-97)
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	9127-0E006US1	
	First Named Inventor	Robert S. Deland	
	COMPLETE IF KNOWN		
	Application Number	/	
	Filing Date	June 3, 1999	
	Group Art Unit	not assigned	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	not assigned

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MAG-STRIPE AUTHENTICATION AND VERIFICATION SYSTEM

the specification of which

(Title of the Invention)

☒ is attached hereto
OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
NONE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
NONE		

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Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/120,816	July 22, 1998	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Byard G. Nilsson	17,350		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number OR ☒ Correspondence address below

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Robert S.		Deland	
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		ZIP	90505
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☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto